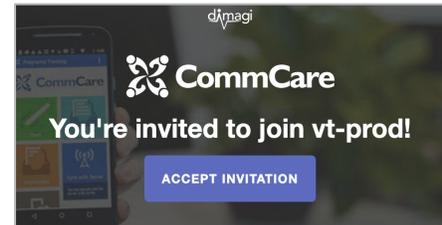


Using the Vermont Transitional Housing Program (THP) Application

Logging into CommCare

Select “Accept Invitation” on the email invite. This will take you to the system log-in page. Enter your name and password. Please only login with the email address that received the invitation to the system. Make sure to click “Confirm Account” after your information is entered to ensure that your account has been created.



Logging into the application

After logging in, you will be redirected to the application landing page. Select the “THP Screening Application” icon to enter the application.



Using the THP Screening Application

STEP 1: [ESD ONLY] Release household data to teams



When a household’s consent form has been signed the household is ready to be released to the teams for screening. To release households for screening select **[ESD USE] Household Data Release**. Enter your search terms to narrow down your results or click “submit” to see a list of all of the households. Check off the households that have completed their release forms and are ready and **continue** to the Release household(s) Data form. Verify the list of selected households and choose the **Release selected household data to non-ESD team members** option. By clicking **Submit** the selected households will now appear in the **Transfer Households** results, including for non-ESD team members.

STEP 2: Add households to your team



Select **Transfer Households**. Enter your search terms to find a household or click “submit” to see a list of all households in your district(s). Check off the households to transfer and **continue** to the Transfer household(s) to Team/District form. Choose the **Transfer to team within the district** option and select your team from the dropdown list that appears just below. Add a Transfer Note to add context for the action. Transfer notes will appear in the case detail view and at the top of the household Screening form.

STEP 3: Access your team’s households



Open the **My Team’s Households** list and find your team’s household. The columns indicate which referral services a household needs based on the household member’s screening form answers. If any member triggers a referral or an urgent safety need it will appear as a trigger for the entire household. On the other hand, the *Screening Complete* badge will only appear when all members have completed their screenings. The *New Transfer* checkmark indicates if the household has been transferred to your team within the past three days.

HOUSEHOLD NAME	MOTEL	NEW TRANSFER	SCREENING COMPLETE	ESD REFERRAL	VCCI REFERRAL	HIREABILITY REFERRAL	HOUSING REFERRAL	URGENT SAFETY NEED
Freddy Krueger	Four Winds			■			■	●
Jeremy Logan	Apple Valley Inn	✓	✓	■		■	■	●

STEP 4: Access a household's members

When you select a household you will be redirected to the household member list. Here you will see many similar columns from the households list, except for this time the referrals are for individual members. The *Family Role* icons indicate whether the member is an adult or a child, and the *Assigned To User* column shares which team member, if any, the member is assigned to.

NAME	FAMILY ROLE	SCREENING COMPLETE	ESD REFERRAL	VCCI REFERRAL	HIREABILITY REFERRAL	HOUSING REFERRAL	URGENT SAFETY NEED	ASSIGNED TO USER
Jeremy Logan	♂	✓	■		■	■	●	Sally Roger
Lisa Logan	♂	✓	■	■				Sally Smith
Baby Logan	👶							

STEP 5: View the household member Case Detail view

Selecting a household shows the **Case Detail** view which displays demographic information and any screening or transfer notes in addition to the referral and urgent safety needs triggering questions from the Screening form. Click on **Continue** to go to the Screening form.

Case Detail ✕

GENERAL URGENT SAFETY NEED ECONOMIC HEALTH HIRING

HOUSING GOALS

Room Number	322
Phone Number	2345672323
Date of Birth	1972-01-01
Gender	female
Number of Adults	2
Number of Children	2
Screening Notes	Household member needs to provide medical forms

Continue

STEP 6: View the forms for members



After selecting a household member, you'll see 3 form options. Click on a form to proceed. This User Guide will take you first through the Household Member Screening form (v1) and then on to the Shared Care Plan and Care Plan Follow-Up forms (added in v2).



STEP 7: Fill-in the Household Member Screening form

Review and edit the pre-populated household information to ensure it's accurate and up-to-date. Complete the Screening form questions in the Programs, Location, Housing, Vocational, and Healthcare sections for the household member.

STEP 8: Assign the household member to yourself or a teammate

At the bottom of the Screening form, you can select a team member to assign the household member to for follow-up.

Select the team member this household will be assigned to:

Sally Smith x ▾

STEP 9: View the household members assigned to you in the My Assigned Household Members list



When you are assigned or assign yourself a household member, you become the primary point person. The household will now appear in your **My Assigned Household Members** list. The household will also remain visible in the **My Team's Households** list, and district-wide households lists, noting that you are the assigned point person.

STEP 10: Fill out the Shared Care Plan form for a household member



After selecting a household member (through either **My Team's Households** or **My Assigned Households**), click on the Shared Care Plan form (see step 6). Review and add to existing Patient and Medical Information, and in the Care Team section you can add PCP/Care Coordinator information. In the Goals section, add up to 8 custom goals informed by conversation with the household member and by reviewing the pre-populated Needs section which summarizes the needs indicated from the Household Member Screening form responses. Goal titles and descriptions cannot be edited once set, but will be visible in a read-only table upon returning to the form.

You can specify when the next follow-up should occur in the Follow-Up section and add up to 4 Care Team Members in the Transition Plan section, indicating up to 1 member as the lead. This can be a different person than the user that the household member's record is assigned to in the application.

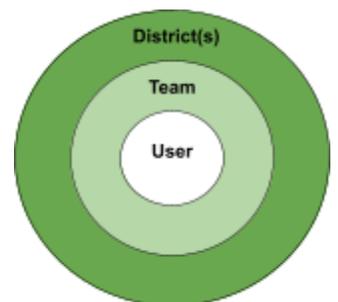
STEP 11: Use the Care Plan Follow-Up form for a household member



In the Care Plan Follow-Up form, register the latest follow-up contact attempt and view notes from past interactions. Using the Milestone checklists (which appear based on which agency referrals were indicated during screening), mark when milestone steps have been completed and view/add notes. Update the status, due date, and related agency for custom goals as needed. You can also view/add free text notes for each goal here. When these are saved, the system automatically notes the date and user's name along with the text of the note. This form can be revisited and updated as many times as needed.

Understanding Districts, Teams and Users

As an application user, you are part of a team. A team facilitates screening and follow up for a subgroup of ~100 households for one or more districts in the State of Vermont. Application users will only be able to access household information that is part of their team's district coverage area.



Submitting Forms with Limited Connectivity

In order to save your answers, the form must be submitted! If you navigate away from a form without submitting your answers, your work will be lost. A form can be submitted as many times as needed. It is recommended that you submit regularly if you are in a limited connectivity environment.